

Example Pandemic Emergency Action Plan

Purpose: The Pandemic Emergency Action Plan will be activated in order to ensure **[Agency]** is able to continue critical and essential operations in the event of a pandemic. All staff and volunteers will be trained annually or upon hire to ensure they are aware of the internal pandemic plan and infection control measures.

When concern of a possible pandemic arises, **[Agency]** staff and clients should give extra attention to the following preventative measures:

- Covering nose and mouth when coughing or sneezing into a tissue, then throwing that tissue away. Coughing into the inner elbow is at least a better choice than not covering at all, but using a tissue is the best choice.
- Maintaining good basic hygiene, for example washing hands frequently with soap and water to reduce the spread of the virus (20 second lather up to mid forearm).
- Maintaining handwashing soap and hand sanitizer supplies in bathrooms, kitchens, and throughout the facilities.
- Frequently cleaning hard surfaces with a disinfectant solution (e.g., door handles, light switches, telephones, countertops, drawers, remotes).
- Wash all bedding and towels in hot water.
- Cleaning the restrooms regularly with bleach and/or non-acid cleaner provided by agency.
- Employees should stay home if they are sick or if they have been caring for someone infected with an easily communicable illness. Employees should communicate any sick leave absences with as much notice as possible.
- Staff with chronic health conditions or other factors which place them at higher risk for infection or complications should speak with their supervisor about their concerns. Reasonable accommodations will be provided by Senior Leadership.
- Managers should separate sick employees from others and immediately send sick employees' home.
- In the event of a pandemic, those returning from travel may be asked to quarantine or obtain medical clearance from a medical professional before returning to work.

I – In the event of a pandemic, Federal, State, and Local Governments will provide important emergency information. Such information will further aid in how staff and clients are able to protect themselves and what to do if they become infected.

a. Once a pandemic has been identified, Senior Leadership (i.e. Executive Director, Program Manager, etc.) should seek information to better understand the threat. The Executive Director will communicate with **[County]** Public Health regarding the pandemic and explain any special precautions or considerations to staff, including, but not limited to, a “no non-essential personnel” and “shelter in place” policies. In the absence of the Executive Director, **[Identify Point of Contact]** will assume responsibility of implementing this plan.

b. Following the instruction of Senior Leadership, Program Managers will take the lead in preparing the staff and clients in each manager’s respective programs for the pandemic. The Agency Staff will work together to address any other areas not covered by a specific program.

II – Program Operations will be affected differently.

a. Administration & Management: The main office located at **[Identify Address]** and any satellite offices will close if Senior Leadership implements a no non-essential personnel policy during the pandemic period. Senior Leadership and Program Managers may be required to work remotely during this period and should be available through their agency issued cell phones or personal cell phones to communicate with other staff. The agency will post a sign on the front door advising of the closure and providing the **[Agency]** Crisis Line phone number.

b. Legal Advocacy/ Temporary Protective Order (TPO) Office: The TPO office will coordinate with the **[Identify County/Circuit]** court system and close if Circuit Court or Senior Leadership implements a no non-essential personnel policy during the pandemic period. While the TPO office remains open, no one with symptoms of illness will be admitted inside the TPO office, but safety planning and information regarding the TPO process will be made available by phone. If the TPO office is closed, the Legal Advocacy Program Manager will post a sign outside of the TPO office advising of the closure and providing the **[Agency]** Crisis Line phone number. The Legal Advocacy Program Manager will ensure Crisis Line staff are able to reach a Legal Advocate for assistance with TPO related questions routed to the Crisis Line during office closure.

c. Counseling: If Senior Leadership implements a no non-essential personnel policy during the pandemic period, agency staff will ensure counseling appointments are canceled as necessary and will notify contractors and clients of group cancellations.

d. Transitional Housing (TH): As soon as any concern of a pandemic arises, TH residents should be encouraged to prepare for the possibility of having to shelter in place and TH program staff should assist their clients in getting any supplies needed for preparation. The Housing Program Manager will ensure TH residents have information on the pandemic, inform them of any office closures, and advise residents of any need to shelter in place. The Housing Program Manager will provide residents with some method to reach program staff if needed during any closure or need to shelter in place. If a resident is suspected to have illness, that resident and others in their household should be quarantined to their apartments for the time-length recommended by CDC guidelines. If emergency medical care is needed, a call to 911 should be placed and the resident should be transported by ambulance to **[Local Identified Hospital]**. During a shelter in place period, no new clients will be accepted into the TH program.

e. Sexual Assault Medical Forensic Exams: The Sexual Assault Exam Suite may remain open during the pandemic period, with Sexual Assault Nurse Examiners (SANE) screening incoming patients for symptoms of illness prior to arrival at **[Agency]** via phone triage and verification of vital signs upon arrival to the SANE suite. The SANE will refer the patient to appropriate medical care if any concerning symptoms are reported or observed. Nurses and Advocates who have symptoms of illness or have sick family members at home should not report for exams and should inform their supervisors immediately if unable to fulfill their on-call duties. The SANE Program Manager will send notice to the SANE-SART e-mail list if any changes are made to the on-call schedule. A list of symptoms can be found at <https://www.cdc.gov/coronavirus/2019-ncov/about/symptoms.html>

f. Shelter: The most critical and essential service that needs to be maintained during a pandemic is shelter. As soon as any concern of a pandemic arises, shelter residents should be encouraged to prepare for the possibility of having to shelter in place and the Shelter Program Manager ensure the shelter has any supplies needed for preparation. The Shelter Program Manager will ensure shelter residents have information on the pandemic, inform them of any office closures, and advise residents of any need to shelter in place. The following continuity of operations plan address three items:

i. Containment – Preventing the spread of disease by identifying rooms as quarantine living environment for infected residents. During a shelter in place period, no new clients will be accepted into the shelter program. If it is suspected that a resident may be infected, that resident and others in their household/ room should be quarantined to their rooms for the time-length recommended by CDC guidelines. If emergency medical care is needed, a call to 911 should be placed and the resident should be transported by ambulance to **[Local Identified Hospital]**.

ii. Testing and Provision of Medications – Suspicions of COVID-19 should be reported to your local health department or hospital. Decisions for testing and the need for medications will be made by the medical providers in your community.

iii. Maintenance and Continuity of Shelter Service – The Shelter Manager will assign [#] live-in staff members to stay on site during the shelter in place period. First, staff will be given the option to volunteer for duty. If there are no volunteers, Senior Leadership will work with the Shelter Manager to strategically assign staff for this duty with consideration given to the following situations: Is the staff member a primary caretaker to minor children or other vulnerable household member; Do they have vulnerability to infection and complications due to age or pre-existing conditions? These [#] staff members will be designated upon learning of the pandemic and expectations should be clearly explained prior to sheltering in place. These three staff members will be living on site and be on 8 hour rotating shifts. They will take direction from Shelter Manager or Senior Leadership and reciprocate contact continually and as often as necessary. **[Agency]** will provide the live-in staff with gloves, cleaning supplies, and other needed items to help aid with illness prevention. Shelter, containment, and antiviral medication assistance will be the primary services. No case management or other services will be provided during a shelter in place period. Documentation will be limited to these three activities.

III. Should any of the above listed procedures prove inadequate, Program Managers will take direction from Senior Leadership or governmental agencies on specific and most current procedures that may have been identified since the publication of this plan.